

Local Form 12

September 2021

UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF NORTH CAROLINA  
CHARLOTTE DIVISION

In re:	)	Chapter 7
JTR1, LLC,	)	Case No. 20-30141
	)	
Debtor.	)	
	)	
A. BURTON SHUFORD, TRUSTEE OF	)	
THE BANKRUPTCY ESTATE OF	)	Adversary Proceeding
JTR1, LLC f/d/b/a JTR, LLC,	)	No. 22-03007
	)	
Plaintiff,	)	
	)	
v.	)	
JMC FINANCIAL HOLDINGS, LLC,	)	
	)	
Defendant.	)	
	)	
A. BURTON SHUFORD, TRUSTEE,	)	Adversary Proceeding
	)	No. 22-03017
v.	)	
TMC FINANCIAL, LLC,	)	
	)	
Defendant.	)	
	)	
A. BURTON SHUFORD, TRUSTEE,	)	Adversary Proceeding
	)	No. 22-03018
Plaintiff,	)	
	)	
v.	)	
BJS INSURANCE, LLC et. al.,	)	
	)	
Defendants.	)	
	)	
A. BURTON SHUFORD, TRUSTEE,	)	Adversary Proceeding
	)	No. 22-03004
Plaintiff,	)	

v. )  
RICHARD KEARNS and YSBELL )  
KEARNS, )  
Defendants. )  
\_\_\_\_\_  
A. BURTON SHUFORD, TRUSTEE, ) Adversary Proceeding  
Plaintiff, ) No. 22-03008  
v. )  
MARK MULLADY, )  
Defendant. )

**NOTICE OF CASE-SPECIFIC NAME AND/OR ADDRESS CHANGE\***

- [ ] Filed by the Debtor(s)  
[x] Filed by a creditor  
[ ] Filed by another party in interest

Pension Benefit Guaranty Corporation files this notice of name and/or mailing address change to be used to provide notice and/or to deliver payments in this case. Pursuant to 11 U.S.C. § 342(e)(2), any notice in this case required to be provided to a creditor by the Debtor or the court will not be provided in care of the new name and/or mailing address designated below until after 7 days following the filing of this notice with the court.

**Current address to be changed (if applicable):**

Name: Pension Benefit Guaranty Corporation  
Address 1: 1200 K Street, NW  
Address 2: \_\_\_\_\_  
Address 3: \_\_\_\_\_  
Address 4: \_\_\_\_\_  
City, State, Zip: Washington, DC 20005-4026

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\* This form cannot be used to file a formal notice of transfer of claim pursuant to Federal Rule of Bankruptcy Procedure 3001(e).

**New name and/or mailing address below:** [ ] for payment purposes only  
[ ] for notice purposes only  
[x] for both payment and notice purposes  
Name: Pension Benefit Guaranty Corporation

Address 1: 445 12<sup>th</sup> Street, SW

Address 2: \_\_\_\_\_

Address 3: \_\_\_\_\_

Address 4: \_\_\_\_\_

City, State, Zip: Washington, DC 20024-2101

Under penalty of perjury, I, the undersigned, affirm that I am authorized to request this address change.

Name and position: Joel W. Ruderman, Attorney (DC 479385)  
(Print or Type)

Signature: /s/ Joel W. Ruderman

Date: October 21, 2022